1		November 9, 19	182
U.S. DEPARTMENT OF LABOR EMPLOYMENT AND TRAINING ADMINISTRATION Bureau of Apprentice— ship and Training Washington, D.C. 20213 Symbols: TDTN: PHV	Distribution: A-544 A-547	SUBJECT: Apprenticeabili Form	CODE: 400 ty Request
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PURPOSE: Since the last revision of the Apprenticeability Information Request Transmittal in 1973, and with the publication of Title 29 CFR Part 29 in 1977, it has become necessary to obtain additional information from Bureau staff requesting apprenticeability determinations for occupations. This Circular is issued to update the form currently being used for this purpose.

BACKGROUND: The need to recognize new occupations as apprentice able continues to grow in order to keep pace with technological advances, and to assure a supply of skilled workers adequate to meet community demands.

Bureau staff should give consideration to occupations in all industries, which involve manual, mechanical or technical skills and knowledge, and which require a minimum of 2000 hours of on the job work experience.

The occupations should be listed in the 4th Edition of the Dictionary of Occupational Titles(DOT) or its supplements. Occupations not listed in the DOT should first be submitted to the U.S. Employment Service with a request for an occupational analysis to determine the feasibility of issuing a DOT Code.

ACTION: In requesting apprenticeability approval of an occupation, it should be ascertained that ALL of the criteria for apprenticeable occupations as outlined in Title 29 CFR Part 29.4 are met, and that ALL of the questions on the Apprenticeability Request form are answered. The information submitted, supported by surveys of industry, will serve as the basis for determining the acceptability of proposed apprenticeable occupations.

Completed Apprenticeability Request forms should be submitted, through channels, to the Division of National Industry Promotion. A Copy of the form is attached to this Circular. Additional copies may be reproduced.

This Circular cancels Circular 73-15, Code 400, dated June 26, 1973, and is effective immediately.

Attachment

BUREAU OF APPRENTICESHIP AND TRAINING EMPLOYMENT AND TRAINING ADMINISTRATION U.S. DEPARTMENT OF LABOR

APPRENTICEABILITY REQUEST FORM

Occupation Title(from 4th Edition D	OT):
DOT Code: SVP: RML: SIC Co	ode: Proposed Term:
Is this occupation part of a recognized app	
If yes, how is separate apprenticeabilit	
Proposed Sponsor (name, address, and contact	person):
Estimated number of apprentices to be train	ed by this sponsor:
Estimated number of workers in this occupat	
Estimated number of employers using this oc	+:
Union involved, if any(name, address, and c	
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	esc 1 a 10 a
Does this union support apprenticeability o	f this occupation? /_Yes //No
Employer association involved, if any(name,	address, and contact person):
Does this association support apprenticeabi	lity of this occupation? / /Yes / /No
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Has this sponsor previously recognized and occupation? $//$ Yes $//$ No. If yes, when, an	undertaken formalized training in this d for what term of training?
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State Director:Regional Director:_			Date;	1

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Proposed Sponsor(name, address, and contact person):
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Estimated number of apprentices to be trained by this sponsor:
Estimated number of workers in this occupation(State-wide):
Estimated number of employers using this occupation:
Union involved, if any(name, address, and contact person):
Does this union support apprenticeability of this occupation? / \(\bar{N} \)
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Employer association involved, if any(name, address, and contact person):
Does this association support apprenticeability of this occupation? //Yes //No
Has this sponsor previously recognized and undertaken formalized training in this occupation? //Yes //No. If yes, when, and for what term of training?
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Codes:

DOT = Dictionary of Occupational Titles SVP = Specific Vocational Preparation

RML = Reasoning, Mathematical, and Language Development SIC = Standard Industrial Classification

Briefly describe the occupation what the worker does skills involved:	s, how it is performed, and the
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Additional comments in support of apprenticeability of	this occupation;
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Attach an outline of the related technical instruction estimated total number of hours.	to be provided; include the
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State Director:	Date:
Regional Director:	Date:
Chief, Division of National Industry Promotion:	
	Date:

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Is this occupation part of a recognized apprenticeable occupation?YesNo If yes, how is separate apprenticeability recognition justified?
Proposed Sponsor(name, address, and contact person):
Estimated number of apprentices to be trained by this sponsor:
Estimated number of workers in this occupation(State-wide):
Estimated number of employers using this occupation:
Union involved, if any(name, address, and contact person):
Does this union support apprenticeability of this occupation? / TYes / TNo
Employer association involved, if any(name, address, and contact person):
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Union involved, if any(name, address, and contact person):
Does this union support apprenticeability of this occupation? / Yes / No
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Does this a	ssociation support apprenticeability of this occupation? / Yes / No
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